

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126018

Entity Name: MURRAY INSURANCE SERVICES, INC.

Current Principal Place of Business:

1149 SW 34TH STREET
PALM CITY, FL 34990

Current Mailing Address:

PO BOX 367
PALM CITY, FL 34991

FEI Number: 11-3665219

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MURRAY, SHANNON B
10770 SE JUPITER NARROW DRIVE
HOBE SOUND, FL 33455 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MURRAY, SHANNON B
Address 10770 SE JUPITER NARROW DRIVE
City-State-Zip: HOBE SOUND FL 33455

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHANNON B. MURRAY

PRESIDENT

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date